

Name: \_\_\_\_\_  
(Optional)

Date: \_\_\_\_\_

Feedback is one of the best ways for trainers to determine what is working well in their workshops and to identify areas where additional growth may be needed. Please take a few minutes to share your thoughts about this training.

*Please check "✓" how much you agree with each statement about the training.*

Statements	Strongly Disagree	Disagree	Neither Disagree or Agree	Agree	Strongly Agree	N/A
1. The training environment was prepared upon my arrival.						
2. The training started and ended on time.						
3. The training was well-organized.						
4. The trainer was knowledgeable about the topic was able to provide timely feedback to questions.						
5. The trainer encouraged participant interaction.						
6. The trainer provided opportunities to engage in self-reflection.						
7. The training was sensitive to the needs of participants.						
8. The training kept me engaged and interested.						
9. The activities and content covered will be useful in my daily work.						
10. The activities were relevant to the training content.						
11. The training contributes to my educational, professional and/or personal development.						
12. The quality of the training met my expectations.						

*Please rate your knowledge of the topic before and after the training with: Poor, Fair, Good, and Excellent.*

Statements	Poor	Fair	Good	Excellent
13. BEFORE the training, my knowledge of the topic was:				
14. AFTER the training, my knowledge of the topic was:				

How can this training be improved? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_